

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>DN</i>	<i>32</i>	<i>11/27</i>
FORMALITY REVIEW	<i>RM</i>	<i>896</i>	<i>01-02-01</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	Original
1	✓
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
9	✓
10	✓
11	✓
12	✓
13	✓
14	✓
15	✓
16	✓
17	✓
18	✓
19	✓
20	✓
21	✓
22	✓
23	✓
24	✓
25	✓
26	✓
27	✓
28	✓
29	✓
30	✓
31	✓
32	✓
33	✓
34	✓
35	✓
36	✓
37	✓
38	✓
39	✓
40	✓
41	✓
42	✓
43	✓
44	✓
45	✓
46	✓
47	✓
48	✓
49	✓
50	✓

Claim	Date
Final	Original
51	✓
52	✓
53	✓
54	✓
55	✓
56	✓
57	✓
58	✓
59	0
60	✓
61	✓
62	✓
63	✓
64	✓
65	✓
66	0
67	✓
68	✓
69	✓
70	✓
71	✓
72	✓
73	✓
74	✓
75	✓
76	✓
77	0
78	✓
79	✓
80	✓
81	0
82	✓
83	0
84	✓
85	✓
86	0
87	✓
88	✓
89	0
90	✓
91	0
92	✓
93	✓
94	0
95	✓
96	✓
97	✓
98	✓
99	✓
100	✓

Claim	Date
Final	Original
101	
102	
103	
104	
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106	
107	
108	
109	
110	
111	
112	
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If more than 150 claims or 10 actions
staple additional sheet here

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